



**PODIATRIC MEDICAL BOARD OF CALIFORNIA  
BOARD MEETING  
June 16, 2022**

**SUBJECT: ENFORCEMENT PROGRAM REPORT**

**ACTION: RECEIVE AND FILE STATUS REPORT**

## **VII B 1-3**

Committee Members:  
Maria Cadenas, MBA, Chair  
Daniel Lee, DPM

### **RECOMMENDATION**

Receive and file the status update report on Enforcement Unit activity.

### **ISSUE**

This status report highlights key areas and statistics for PMBC's Enforcement Unit and other enforcement activity of note since reported at the last full meeting of the Board March 17, 2022, and covers the period from January 1, 2022 through March 31, 2022 for end of quarter purposes.

### **DISCUSSION**

#### **I. Current Enforcement Statistics**

Enforcement reports provide a "current capture" of quarterly data along with a comparison over the prior fiscal year's (20/21) quarterly data (for the same quarter) in order to notate any statistically significant changes and better track improvements and/or deficiencies.

##### **A) Complaint Data**

Third quarter complaint data over the prior year's third quarter data is provided for review. A total of 52 complaints were received between January 1, 2022 and March 31, 2022. This is an 86% increase compared to the same quarter one year ago when 28 complaints were received. The average days to close or assign a case was 6 days, which is within the DCA target of 10 days. **(Attachment A – Enforcement Statistics – Complaint Data).**

##### **B) Investigation Data**

During the third quarter, 52 desk investigations were assigned, which is a 148% increase over the third quarter of last year which had 21 desk investigations assigned. 51 desk investigations were completed, an 82% increase over last year's 28 completed. Desk investigation processing time decreased by 59% with an average processing time of 41 days for this quarter.

There were seven field investigations assigned during the third quarter, a 75% increase from four assigned the year prior. Field investigators completed 18 cases, which was a 157% increase from seven cases completed the previous third quarter. This increase of case completions may have significantly impacted our investigation budget. However, the increase in investigation costs also coincides with a more thorough time tracking and billing process initiated by Division of Investigation (DOI) on January 1, 2022. PMBC will be closely monitoring investigation costs and holding discussions with the DOI and the Budget Office on how we can manage cost increases. There was a 5% increase in field investigation processing time over the third quarter of last fiscal year with field investigations taking an average of 461 days to complete.

Case investigation times (which include both desk and field investigations) for the third quarter show the average days to complete investigations at 145 days, which is close to the DCA target set of 125 days.

Case Investigation Aging data shows that of the 51 complaints closed during quarter three, 70% (36) of complaints were closed within 90 days, 12% (6) were closed between 91 days to one year, and 18% (9) took longer than one year to close. **(Attachment B – Enforcement Statistics – Investigation Data).**

#### **C) Disciplinary Data**

Six cases were initiated during the third quarter which is a 600% increase over the same period last year when no cases were initiated. One Final Order went into effect compared to no Final Orders the third quarter of last fiscal year.

No citations were issued the third quarter a 300% decrease from the three citations issued the prior years third quarter.

During the third quarter, one new probationer was added, one probationer successfully completed probation, and one probation violation case was submitted to the Attorney General's Office. There were 8 active licensees on probationary status at the end of quarter three. **(Attachment C – Enforcement Data – Disciplinary Data).**

#### **D) Enforcement Statistics – Fiscal Year (FY) to Date Totals**

This report shows a summary of all enforcement statistic categories for FY 2021/2022. This period is compared to 2020/2021 data and contains data for quarters one through three.

Total complaint intake increased by 25% over last FY for quarters one through three.

Total investigations assigned increased 26% from quarters one through three last FY. The average days to complete investigations this FY to date (for both desk and field investigations) is 195 days, a 7% increase over the same period last FY where completion of all investigations averaged 182 days.

Ten new disciplinary cases were initiated through the Office of Attorney General during the first three quarters of FY 21/22, which matches disciplinary case initiations from the same period last FY.

Five final Orders were issued, compared to six last FY. One Accusation was withdrawn, dismissed, or declined during quarters one through three, compared to three the prior FY, a 67% decrease.

No citations have been issued as of yet for FY 21/22.

With enforcement cases, reports ran one day apart may show slight differences as the cases are always in movement with multiple parties working on them and adding activity codes. The reports provide an overall snapshot of the enforcement program at any given time. **(Attachment D – Enforcement Statistics – Fiscal Year to Date Totals).**

#### **E) Attorney General (AG) Case Aging Data**

Case aging data based on reports received directly from the AG's Office is provided. The report includes information through May 10, 2022.

Cases have been delayed more than usual the past two years due to various legal proceeding delays, COVID related delays, cases held for discussion, etc. Cases are beginning to complete, but the chart shows the current top two lengthiest cases have experienced legal proceeding delays.

There are currently 13+ active cases pending completion with the AG. Some cases forwarded to the AG may not show on the case aging report provided by

the AG as they have not been formally accepted for prosecution due to pending criminal convictions or need for additional investigation. **(Attachment E – Enforcement Statistics – Attorney General Case Aging Data).**

Staff is aware that some additional data is not received through the Attorney General reports, and when known, this is noted below the table with references to the applicable cases.

The BreEZe system provides data for cases that have closed and the report from the AG report shows the aging for cases currently in process and recently closed. Case aging numbers with the AG are not going to match what is reported in BreEZe as AG start and end dates for receipt and closure of a case differ from DCA. DCA start dates begin with the date a complaint is initiated and close with the effective date of a decision (in most cases 30 days after it is signed). The AG start date is the date a case is accepted for prosecution and closes the date a decision is signed.

**F) DCA Performance Measures**

DCA's Open Data Initiative reporting tool has performance measure data posted through the second quarter of FY 2021/2022:

[https://www.dca.ca.gov/data/enforcement\\_performance.shtml](https://www.dca.ca.gov/data/enforcement_performance.shtml)

This tool allows individuals to search complaint, investigation, and disciplinary performance measure statistics and provides the data in a variety of charts and graphs. A search can be conducted by the quarter, or a full fiscal year of data can be viewed. Podiatric data can also be compared to the data of other boards and bureaus.

Historical enforcement data (prior to FY 16/17) can be found at:

[https://www.dca.ca.gov/enforcement/cpei/quarterly\\_reports.shtml](https://www.dca.ca.gov/enforcement/cpei/quarterly_reports.shtml)

**II. Probation Program Update**

**A) Probation/Cost Recovery Recoupment**

A valid and accurate report is now available for enforcement payment tracking.

The report for enforcement payments received between January 1 and March 31, 2022 showed \$42,635.83 in cost recovery payments and \$9,129.25 in

probation Monitoring payments for a total of \$51,765.08 in enforcement cost recoupment for quarter three.

### **III. Consultant and Expert Program Update**

The Consultant Training Binders are currently being updated and assembled to prepare for a future training session. Unfortunately, other priorities, workload, deadlines and other circumstances have delayed the binder updates and training longer than originally anticipated. The Board will be updated when training is ready to commence.

#### **A) Consultant and Expert Applications**

The Minimum Requirements for Consultants and Experts were revised by the Board at the Board Meeting on December 10, 2021. The application form was revised at the March 7, 2022 Board Meeting.

The Board requested that current Expert/Consultant applicants be tabled for discussion until after the expert/consultant application process was thoroughly reviewed by the Enforcement Committee. The Enforcement Committee feels satisfied with the current process after making slight revisions the past two Board Meetings.

Dr. Tea's application meets the Minimum Requirements and is presented for Board review and vote. **(Attachment F – Dr. Tea Expert/Consultant application packet and revised Board policy and application)**

### **NEXT STEPS**

Staff will continue to review enforcement matrix reports and other data in order to effectively and efficiently expedite investigation of consumer complaints and prosecution of open cases. Staff will also research and provide suggestions for enforcement program improvements.

## **ATTACHMENTS**

- A. Enforcement Statistics - Complaint Data
- B. Enforcement Statistics - Investigation Data
- C. Enforcement Statistics - Disciplinary Data
- D. Enforcement Statistics – Fiscal Year to Date Totals
- E. Enforcement Statistics - Attorney General Case Aging Data
- F. Dr. Tea Expert/Consultant application packet and revised Board policy and application

Prepared by: Bethany DeAngelis

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Bethany DeAngelis  
Enforcement Unit Coordinator

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Brian Naslund  
Executive Officer

**Podiatric Medical Board of California**  
**Enforcement Statistics – Complaint Data**  
**Quarter 3 Report (January – March, 2022)**

**Complaint Intake**

	22-Jan	22-Feb	22-Mar	QTR 3 Total	Over QTR 3 last FY	+/- %
Received	24	11	17	52	28	+86%
Closed W/O Investigation	0	0	0	0	0	0%
Assigned for investigation	23	11	18	52	21	+148%
Average days to close or assign (Target = 10 Days)	4	5	11	6	6	0%
Pending	3	3	2			

**Complaint Intake - Convictions/Arrests Reports**

	22-Jan	22-Feb	22-Mar	QTR 3 Total	Over QTR 3 last FY	+/- %
Received	1	0	0	1	1	0%
Assigned for investigation	1	0	0	1	1	0%
Average days to close or assign (Target = 10 Days)	3	0	8	3	3	0%
Pending	0	0	0			

**Total Complaint Intake**

	22-Jan	22-Feb	22-Mar	QTR 3 Total	Over QTR 3 last FY	+/- %
Received	25	11	17	53	29	+152%
Assigned for investigation	24	11	18	53	22	+141%
Average days to close or assign (Target = 10 days)	4	3	11	6	6	0%
Pending	3	3	2			

**Podiatric Medical Board of California**  
**Enforcement Statistics – Investigation Data**  
**Quarter 3 Report (January – March 2022)**

**Desk Investigations**

	22-Jan	22-Feb	22-Mar		QTR 3 Total	Over QTR 3 last FY	+/- %
Investigations Assigned	23	11	18		52	21	+148%
Investigations Completed	11	18	22		51	28	+82%
Avg Days to Complete Investigations	34	39	46		41	101	-59%
Investigations Pending	37	30	26				

**Field Investigations**

	22-Jan	22-Feb	22-Mar		QTR 3 Total	Over QTR 3 last FY	+/- %
Investigations Assigned	1	3	3		7	4	+75%
Investigations Completed	4	7	7		18	7	+157%
Avg Days to Complete Investigations	523	468	385		461	438	+5%
Investigations Pending	33	31	30				

**Case Investigations**

	22-Jan	22-Feb	22-Mar		QTR 3 Total	Over QTR 3 last FY	+/- %
Referred to Investigation	24	11	18		53	22	+141%
Investigations Completed	11	18	22		51	35	+46%
Avg Days to Complete Investigations (Target = 125 Days)	25	196	163		145	191	-24%
Investigations Pending	73	66	62				



**Podiatric Medical Board of California**  
**Enforcement Statistics – Investigation Data**  
**Quarter 3 Report (January – March 2022)**

**Case Investigations Aging**

	22-Jan	22-Feb	22-Mar		QTR 3 Total	Over QTR 3 last FY	+/- %
Up to 90 Days	10	11	15		36	21	+71%
91 to 180 Days	1	2	2		5	3	+67%
181 Days to 1 Year	0	0	1		1	3	-67%
1 to 2 Years	0	4	2		6	6	0%
2 to 3 Years	0	1	2		3	2	+50%
3 to 4 Years	0	0	0		0	0	0%

**Investigations Completed Without Referral for Disciplinary Action**

	22-Jan	22-Feb	22-Mar		QTR 3 Total	Over QTR 3 last FY	+/- %
Investigations Complete W/O Disciplinary Referral	10	19	20		49	36	+36%
Average Days to Close W/O Disciplinary Referral	27	163	94		111	203	-45%

**Podiatric Medical Board of California**  
**Enforcement Statistics – Disciplinary Data**  
**Quarter 3 Report (January – March 2022)**

**Attorney General Cases**

	22-Jan	22-Feb	22-Mar		QTR 3 Total	Over QTR 3 last FY	+/- %
Cases Initiated	3	1	2		6	0	+600%
*Cases Pending	14	14	16				
Accusations Withdrawn/Dismissed/Declined	0	0	0		0	0	0%
Closed Without Disciplinary Action	0	1	0		1	0	+100%
Statement of Issues/Accusations Filed	1	0	0		1	3	+67%
Final Orders - Decisions/Stipulations	1	0	0		1	0	+100%
Avg Days to Complete Final Orders (target = 540 Days)	1,011	n/a	n/a		1,011	n/a	n/a

**Attorney General Case Aging**

	22-Jan	22-Feb	22-Mar		QTR 3 Total	Over QTR 3 last FY	+/- %
Up to 90 Days	0	0	0		0	0	0%
91 to 180 Days	0	0	0		0	0	0%
181 Days to 1 Year	0	0	0		0	0	0%
1 to 2 Years	0	0	0		0	0	0%
2 to 3 Years	1	0	0		1	0	+100%
3 to 4 Years	0	0	0		0	0	0%
Over 4 Years	0	0	0		0	0	0%

\*Count now includes Open Non-Administrative Mandate Cases / Also, multiple complaints for the same DPM are being counted/consolidated as 1 case for reporting purposes

**Podiatric Medical Board of California**  
**Enforcement Statistics – Disciplinary Data**  
**Quarter 3 Report (January – March 2022)**

**Other Legal Actions**

	22-Jan	22-Feb	22-Mar		QTR 3 Total	Over QTR 3 last FY	+/- %
None to report	0	0	0		0	0	0%

**Citations**

	22-Jan	22-Feb	22-Mar		QTR 3 Total	Over QTR 3 last FY	+/- %
Citations Issued	0	0	0		0	3	-300%
Average Days to Close or Assign	n/a	n/a	n/a		n/a	432	n/a

**Probation**

	22-Jan	22-Feb	22-Mar		End of QTR 3
Number of Active Probationers	8	7	7		7
Number of Tolled Probationers	7	7	7		7
Probation Cases Initiated (New Probationers)	1	0	0		1
Probation Cases Closed (Probation Completions)	1	0	0		1
Probation Cases Closed (Revocation or Surrender)	0	0	0		0
Probation Violations Submitted to the AG	1	0	0		1

**Podiatric Medical Board of California**  
**Enforcement Statistics – Fiscal Year to Date Totals**  
**Quarter 3 Report (July 2021 – June 2022)**

**Total Complaint Intake (includes complaint intake and conviction/arrest notification complaints)**

	FY 21/22 QTR 1	FY 21/22 QTR 2	FY 21/22 QTR 3	FY 21/22 QTR 4		FY 21/22 QTR 1-4 Total	Over FY 20/21 QTR 1-4 Total	+/- %
Received	33	25	53			*111	*89	+25%
Assigned for investigation	31	27	53			*111	*88	+26%
Average days to close or assign (Target = 10 days)	6	6	6			6	6	0%

**Total Case Investigations**

	FY 21/22 QTR 1	FY 21/22 QTR 2	FY 21/22 QTR 3	FY 21/22 QTR 4		FY 21/22 QTR 1-4 Total	Over FY 20/21 QTR 1-4 Total	+/- %
Investigations Assigned	31	27	53			*111	*88	+26%
Investigations Completed	22	32	51			*105	*113	-7%
Avg Days to Complete Investigations (Target = 125 Days)	246	241	145			**195	**182	+7%

\*Numbers may show slight variances from other end of year totals as some prior quarterly data totals may not reflect data that had been entered into BreEZe at a later date.

\*\*Average is not calculated by obtaining the mean of the quarter totals, but by averaging the mean of all cases completed during those quarters.

**Podiatric Medical Board of California**  
**Enforcement Statistics – Fiscal Year to Date Totals**  
**Quarter 3 Report (July 2021 – June 2022)**

**Attorney General Cases**

	<b>FY 21/22 QTR 1</b>	<b>FY 21/22 QTR 2</b>	<b>FY 21/22 QTR 3</b>	<b>FY 21/22 QTR 4</b>	<b>FY 21/22 QTR 1-4 Total</b>	<b>Over FY 20/21 QTR 1-4 Total</b>	<b>+/- %</b>
Cases Initiated	4	0	6		10	10	0%
Accusations Withdrawn/Dismissed/Declined	0	1	0		1	3	-67%
Closed Without Disciplinary Action	0	0	1		1	2	+100%
Statement of Issues/Accusations Filed	3	1	1		5	8	+38%
Final Orders - Decisions/Stipulations	0	4	1		5	6	+17%
Avg Days to Complete Final Orders ( <b>target = 540 Days</b> )	n/a	1,261	1,011		*1,211	*1,435	-16%

**Other Legal Actions**

	<b>FY 21/22 QTR 1</b>	<b>FY 21/22 QTR 2</b>	<b>FY 21/22 QTR 3</b>	<b>FY 21/22 QTR 4</b>	<b>FY 21/22 QTR 1-4 Total</b>	<b>Over FY 20/21 QTR 1-4 Total</b>	<b>+/- %</b>
PC23 Order	0	0	0		0	0	0%
Interim Suspension Order	0	0	0		0	0	0%

\* Average is not calculated by obtaining the mean of the quarter totals, but by averaging the mean of all cases completed during those quarters.

**Podiatric Medical Board of California**  
**Enforcement Statistics – Fiscal Year to Date Totals**  
**Quarter 3 Report (July 2021 – June 2022)**

**Citations**

	FY 21/22 QTR 1	FY 21/22 QTR 2	FY 21/22 QTR 3	FY 21/22 QTR 4		FY 21/22 QTR 1-4 Total	Over FY 20/21 QTR 1-4	+/- %
Final Citations	0	0	0			0	3	+300%
Average Days to Complete	n/a	n/a	n/a			n/a	431	n/a

Citations issued were based on the following violations:

Citation Number	Code(s) Violated	Code Description(s)
n/a		

**Podiatric Medical Board of California**  
**Enforcement Statistics – Attorney General Case Aging Data**  
**As of May 10, 2022**

**Attorney General Case Aging**

Case No.	Matter Type	Accepted for Prosecution	Pleading Sent	Pleading Signed	Notice of Defense Received	Request to Set	OAH Dates Received	Case Rev Ret/Rej	Stipulation Signed by Respondent	Hearing Date	Adjudicate	Decision Signed	Age of Case
1	ACC	02/16/18	04/05/18	04/25/18	11/28/18	02/06/19	02/12/19						1,544
2	ACC	05/22/20	08/12/20	09/02/20	09/29/20	10/26/20	10/27/20			07/18/22			718
3	ACC	10/14/20	12/23/20	02/11/21	02/24/21	08/03/21	08/09/21		03/07/22		03/08/22		510
4	ACC	06/09/21	06/25/21	07/20/21	08/03/21	08/10/21	08/16/21		03/30/22		04/12/22		307
5	ACC	07/26/21											288
6	ACC	09/06/21	09/09/21	09/10/21	09/27/21								246
7	ACC	10/11/21	10/18/21	10/28/21	11/10/21	02/28/22	03/03/22						211
8	REVO	01/04/22	01/14/22	01/19/22	04/01/22								126
9	REIN	01/20/22				01/26/22	01/27/22			05/05/22	D: 05/05/22		105
10	ACC	05/10/21	07/12/21	07/20/21	07/20/21	07/20/21	07/20/21			08/12/21	D: 08/12/21		94
11	ACC	04/07/22	04/11/22										33
12	ACC												0
13	ACC												0

ACC = Accusation

AC/RV = Accusation/Petition to Revoke Probation

REDU = Petition to Reduce Penalty Filed

REVO = Petition to Revoke Probation

SOI = Statement of Issues

ISO = Interim Suspension Order

A: Reviewed: Case Returned to Client or DOI

B: Reviewed – Case Rejected

C: Stipulation Sent to Client

D: Hearing – Date Concluded/Submitted

E: Default Decision Sent: Failure to File NOD/Failure to Appear at Hearing

F: Petition Withdrawn or Pleading Withdrawn

**Notes:**

Case 1: Criminal trial February 10, 2022 – case in settlement process

Case 2: Hearing date rescheduled for July 2022

Cases 3 & 4: Board voting in process

Case 9: Awaiting ALJ Decision document

Case 10: Decision document not delivered – received late – Board voting in process

Cases 12 & 13: Transmitted to AG not yet accepted for prosecution



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### Expert Witness/Consultant Application

Name: TEA NGUYEN License #: 5256  
 Mailing Address: [REDACTED]  
 City: [REDACTED] State: CA Zip: [REDACTED]  
 Phone: [REDACTED] Fax: [REDACTED] E-mail: [REDACTED]

1. Do you wish to serve as an: ☒ Expert Witness ☒ Consultant
2. Do you have prior expert witness/consultant experience? ☐ yes ☒ no
3. Do you have peer review experience? ☒ yes ☐ no
4. Have you served as an examiner for:
  - ☐ American Board of Podiatric Surgery
  - ☐ American Board of Podiatric Orthopedic & Primary Podiatric Medicine
  - ☐ Another state licensing board: \_\_\_\_\_
  - ☐ Another organization: \_\_\_\_\_
5. Did you complete an approved residency program? ☒ yes ☐ no  
 If so, please check which:
  - ☐ Rotating Podiatric Residency (RPR)
  - ☐ Podiatric Orthopedic Residency (POR)
  - ☐ Podiatric Surgical Residency – 12 months (PSR12)
  - ☒ Podiatric Surgical Residency – 24 months (PSR24)
  - ☐ Primary Podiatric Medical Residency
6. Please list the general acute care hospital facility(ies) where you have surgical staff privileges:

WATSONVILLE COMMUNITY HOSPITAL

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



Expert Witness/Consultant Application  
Page 2

7. What percentage of your practice involves surgery?

- |                                       |  |
|---------------------------------------|--|
| <input type="checkbox"/> none         | <input type="checkbox"/> 16 – 30%            |
| <input type="checkbox"/> less than 5% | <input checked="" type="checkbox"/> 31 - 50% |
| <input type="checkbox"/> 6 – 15%      | <input type="checkbox"/> more than 50%       |

8. What percentage of your practice involves ankle surgery?

- |   |  |
|---|--|
| <input type="checkbox"/> none               | <input type="checkbox"/> 16 – 30%      |
| <input type="checkbox"/> less than 5%       | <input type="checkbox"/> 31 - 50%      |
| <input checked="" type="checkbox"/> 6 – 15% | <input type="checkbox"/> more than 50% |

9. Please list three DPMs practicing in California who we may contact as references:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

10. Please attach a copy of your current Board Certification and curriculum vitae and return to PMBC.

Signature: \_\_\_\_\_ Date: 02/14/22

## Tea Nguyen, DPM

Cell: [REDACTED] | [REDACTED] | [REDACTED] CA [REDACTED]

EXPERIENCES

Pacific Point Podiatry, Inc April 2018 - present  
Freedom, CA

- ✓ CEO/Owner
- ✓ Specializing in Minimally Invasive Surgery & healing diabetic foot ulcers

The Foot Doctors of Santa Cruz County Aug 2016 - July 2018  
Watsonville, CA

- ✓ Associate podiatrist, generalist

Wound Surgery Fellowship, 07/2014 - 06/2015

University of Texas Southwestern Medical Center, Dallas, Texas

- ✓ 3<sup>rd</sup> podiatrist to receive fellowship by Plastic Surgery Department
- ✓ Managed high volume in- & out-patient care, >450 surgical cases
- ✓ Coordinated daily responsibilities overseeing team including mid-level providers, residents/fellows, & technicians; established multidisciplinary collaboration with plastic reconstructive surgery, vascular surgery, cardiovascular surgery, interventional radiology

Podiatric Medicine/Reconstructive Rearfoot & Ankle Surgery Residency, 07/2011 - 06/2014

St John Macomb-Oakland Hospital, Warren, Michigan

- ✓ >560 total & 115 rearfoot/ankle cases in 3 years training
- ✓ Created resident academic schedule, led analytical discussions, presented lectures
- ✓ Established networking with microvascular & orthopedic surgeons to broaden residency experience

Doctor of Podiatric Medicine & Surgery, 08/2007 - 05/2011

Des Moines University College of Podiatric Medicine & Surgery, Iowa

- ✓ Creator of "CPMS Footnotes" college newspaper to foster the humanitarian side of medicine, creating a platform for students to speak freely in a creative & positive manner
- ✓ Club President, Podiatric Practice Management
- ✓ Completed 40 credits of Master of Public Health courses

Bachelor of Science Human Biology, 12/2006

University of California San Diego

- ✓ Muir College - emphasis in humanities & analytical writing
- ✓ Research student in the Department of Orthopaedic Surgery Clinical Physiology Laboratory

## RESEARCH PUBLICATIONS / AWARDS / PRESENTATIONS

Burst Stimulation Reducing Pain and Improving TspO2 in Peripheral Vascular Disease: A Case Study  
Neelesh K. Anand, MD; Tea Nguyen, DPM; Lawrence Potee, MD, PhD

✓ Won Best Poster Presentation at North American Neuromodulation Society, Jan 2018

Healing Heel Ulcers in High-Risk Patients: Distally Based Peroneus Brevis Muscle Flap Case Series  
Tea Nguyen, DPM; Edgardo Rodriguez-Collazo, DPM

✓ Manuscript submitted in Journal of Foot and Ankle Surgery, July 2017

Effects of 4% Ethanol Sclerosing Injection on Morton's Neuroma: A Histological Study

Patrick DeHeer, DPM; Faye-Rose Grebenyuk, DPM; Tea Nguyen, DPM; Shrunjay Patel; Rick S Bains, DO

✓ Manuscript submitted in Journal of the American Podiatric Medical Association, May 2017

A Retrospective Review of Split Thickness Skin Grafts in the Foot and Ankle of Patients with Diabetes  
Kyle Sannic, MD; Tea Nguyen, DPM; Javier LaFontaine, DPM; Lawrence Lavery, DPM

✓ Published in Journal of the American Podiatric Medical Association, Sept 2017

Diagnostic accuracy of Probe to Bone to Detect Osteomyelitis in the Diabetic Foot: A Systematic Review

Kenrick Lam, Suzanne AV Van Asten, MD; Tea Nguyen, DPM; Javier La Fontaine, DPM; Lawrence A. Lavery, DPM, MPH

✓ Published in Diabetes Care 2016

Reoperation and Reamputation After Transmetatarsal Amputation: A Systematic Review and Meta-Analysis

Jakob C. Thorud, DPM, MS; Daniel C. Jupiter, PhD; Jonathan Lorenzana, DPM; Tea Tu Nguyen, DPM; Naitiro Shibuya, DPM, MS, FACFAS

✓ Published in Journal of Foot and Ankle Surgery July 2016

Firearm Injury to the Lower Limb in the United States

Patrick DeHeer, DPM; Faye-Rose Grebenyuk, DPM; Wenjay Sung, DPM; Tea Nguyen, DPM; Aaron Leshikar, DPM; Aaron Warnock, DPM

✓ Selected for poster presentation at American Podiatry Medical Association, July 2016

TPMA June 2015 "A Retrospective Review of Split Thickness Skin Grafts in the Foot & Ankle of Patients with Diabetes"

Tea Nguyen, DPM; Javier La Fontaine, DPM; Lawrence Lavery, DPM, MPH

✓ Won 1<sup>st</sup> place in "Post-Graduate Research Poster Competition"

MPMA Feb 2013 "*Stenotrophomonas maltophilia* in Podiatry"

Tea Nguyen, DPM-PGY-2; Neil Shaw, DPM

✓ Won 2<sup>nd</sup> place for "Best Resident Abstract Presentation"

JAPMA Jan 2010 "Load Deformation Evaluation of Lateral Radiographic Foot Measurements"

Tea Nguyen, DPM '11; Adam Lang, DPM '11; John Bennett, DPM, FACFAS; Vassilios Vardaxis, PhD

✓ Won 3<sup>rd</sup> place for "Outstanding Student or Resident Abstract"

"Factors Decreasing Accuracy of MRI in the Diagnosis of Osteomyelitis in the Diabetic Foot"

Kenrick Lam, BS; Tea Nguyen, DPM; Suzanne van Asten, MD; Javier La Fontaine, DPM, Larry Lavery, DPM, MPH

✓ Selected for poster presentation at American Diabetes Association's 75<sup>th</sup> Scientific Sessions, 2015

"Bunion Correction Using a Simple Internal Fixation Technique: A Single Lag Screw & Staple Construct"

Tea Nguyen, DPM; Alan Kidon, DPM; Daniel Shanahan, DPM

✓ Selected for oral presentation for St John Macomb-Oakland Hospital Research Day, 2014

"A Multidisciplinary Approach to Limb Salvage"

Tea Nguyen, DPM; Gene Caicco, DPM; Victor Nwosu, DPM; Carlos Ramirez, DDS, MD

✓ Poster presentation at St John Macomb-Oakland Hospital Research Day, 2014

"Foot Deformation on Lateral Radiographic Measurements at Low, Medium, & High Loads"

Tea Nguyen, DPM; Adam Lang, DPM; John Bennett, DPM, FACFAS; Vassilios Vardaxis, PhD

✓ In progress for submission

"Ankle Pain: A Case Study on Using Juvenile Articular Cartilage to Repair an Osteochondral Defect"

Tea Nguyen, DPM; Mahmoud Salem, DPM; Neil Shaw, DPM

✓ Poster presentation at St John Macomb-Oakland Hospital Research Day, 2012

"Subtle Lisfranc Injuries: A Re-evaluation of the Radiographic Diagnostic Criteria"

Adam Lang, DPM '11; Tea Nguyen, DPM '11; John Bennett, DPM, FACFAS; Vassilios Vardaxis, PhD

✓ Abstract accepted to American College of Foot & Ankle Surgeons Clinical Conference, 2010

## VOLUNTEER

Fall 2015 Danialle Karmanos Work It Out in partnership with the DMC Children's Hospital of Michigan

- ✓ Yoga teacher for fourth grade students, using yoga-based approach to promote health in mind, body & spirit; reducing anxiety; preventing childhood obesity & increasing self esteem

Spring 2009 Teaching Assistant for Physical Diagnosis, DMU

- ✓ Trained first year medical students through their physical diagnosis course, demonstrating clinical techniques, & prepared students for patient interactions

Summer 2008 Research Student, DMU

Mentors: Vassilios Vardaxis, PhD & John Bennett, DPM, FACFAS

- ✓ Evaluated foot dynamics using the Human Performance Lab for gait analysis

## LICENSES/CERTIFICATION

- ✓ Board Certified, Minimally Invasive Surgery by the American Board of Multiple Specialties in Podiatry, 2021
- ✓ Introduction to Hyperbaric Medicine and Wound Care certificate of completion, 11/2019
- ✓ California Podiatric Medicine & Surgery, Licensed since 2016
- ✓ Board Certified, American Board of Podiatric Medicine, 2018-2028
- ✓ International Rotating Scholar at Chang Gung Memorial Hospital in Plastic Surgery Division, 9/2015
- ✓ Advanced Microvascular Techniques in Lower Extremity Muscle Flaps, 7/22/2015
- ✓ Basic & Advanced Microvascular Surgery, 06/2014

## PROFESSIONAL AFFILIATIONS

- ✓ American Podiatric Medical Association (APMA)
- ✓ California Podiatric Medical Association (CPMA)

## CONTINUING EDUCATION / PROFESSIONAL INTERESTS

- ✓ Minimally Invasive Foot & Ankle Surgery, 2020-2021
- ✓ Gulf Coast Diabetic Lower Extremity Workshop, research collaborator 3/25/2016
- ✓ Chicago Lower Extremity Surgical Symposium, 10/2015, 10/2016, 10/2017
- ✓ Medical Missions: San Miguel, Mexico 08/2015; El Salvador, San Salvador 05/2009
- ✓ Total Ankle Replacement by Zimmer 03/2014
- ✓ Diabetic Limb Salvage Conference MedStar Georgetown University Hospital 12/2014
- ✓ International External Fixation Symposium UT Health Science Center 12/2013
- ✓ Association of Extremity Nerve Surgeon Symposium 11/2013
- ✓ ACFAS Foot & Ankle Arthroscopic Surgical Skills Course 8/2013
- ✓ ACFAS Trauma Surgical Skills Course 11/2012



**POLICY DECISION: Minimum Requirements for New Medical Consultants and Experts**

1. Hold a current, valid and unrestricted California license to practice podiatric medicine.
2. Be active in the practice of podiatric medicine in the subject area being reviewed, practicing minimum of 3 years in the specialty area after board certification, or retired no more than 5 years.
3. Have completed a postgraduate medical education program approved by the Council on Podiatric Medical Education.
4. Be certified by the American Board of Foot and Ankle Surgery (Foot surgery and/or Rearfoot/Ankle reconstruction), the American Board of Podiatric Medicine, or the American Board of Multiple Specialties in Podiatry and must maintain a current certificate.
5. Have surgical staff privileges in at least one general acute care hospital facility, or have any prior peer review experience (hospital, medical society or equivalent).
6. Must not have been subject to disciplinary action by the PMBC, , or by any other government public health agency, i.e., the filing of an Accusation, Discipline, or Statement of Issues that was not withdrawn or dismissed, or the subject of a field investigation by the PMBC within the last five (5) years that was not closed and deleted from Podiatric Medical Board records.
7. Must not be under PMBC investigation for a violation of any laws relating to the practice of medicine at the time of appointment or be the subject of such a case pending in the Attorney General's office.
8. Must recuse themselves from the review in the event of a conflict of interest.
9. Must not misrepresent his or her credentials, qualifications, experience or background.
10. Must be willing and available to testify at administrative hearings.

Method of Adoption: Board Vote  
 Date of Adoption: June 5, 1987  
 Revision Date(s): December 7, 1990  
 January 25, 1994  
 November 6, 1998  
 May 5, 2000  
 November 3, 2000  
 June 6, 2003  
 October 15, 2010  
 February 11, 2011  
 March 3, 2017  
 December 10, 2021



## Expert Witness/Consultant Application

Name: \_\_\_\_\_ License #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

1. Do you wish to serve as an: ☐ Expert Witness ☐ Consultant
2. Do you have prior expert witness/consultant experience? ☐ yes ☐ no
3. Do you have peer review experience? ☐ yes ☐ no
4. Have you served as an examiner for:
  - ☐ American Board of Foot & Ankle Surgery
  - ☐ American Board of Podiatric Medicine
  - ☐ Another state licensing board: \_\_\_\_\_
  - ☐ Another organization: \_\_\_\_\_
5. Did you complete an approved residency/fellowship program? ☐ yes ☐ no  
 If so, please check which:
  - ☐ Rotating Podiatric Residency (RPR), or Podiatric Orthopedic Residency (POR), or Primary Podiatric Medical Residency
  - ☐ Podiatric Surgical Residency (PSR 12-36 months)
  - ☐ Podiatric Medicine and Surgery Residency (PMSR)
  - ☐ Reconstructive Rearfoot/Ankle Surgery (RRA)
  - ☐ Fellowship Program: \_\_\_\_\_
6. Please list the general acute care hospital facility(ies) where you have surgical staff privileges:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

**Expert Witness/Consultant Application  
Page 2**

7. What percentage of your practice involves surgery?

- |                                       |  |
|---------------------------------------|--|
| <input type="checkbox"/> none         | <input type="checkbox"/> 16 – 30%      |
| <input type="checkbox"/> less than 5% | <input type="checkbox"/> 31 - 50%      |
| <input type="checkbox"/> 6 – 15%      | <input type="checkbox"/> more than 50% |

8. What percentage of your practice involves ankle surgery?

- |                                       |  |
|---------------------------------------|--|
| <input type="checkbox"/> none         | <input type="checkbox"/> 16 – 30%      |
| <input type="checkbox"/> less than 5% | <input type="checkbox"/> 31 - 50%      |
| <input type="checkbox"/> 6 – 15%      | <input type="checkbox"/> more than 50% |

9. Please list three DPMs practicing in California who we may contact as references:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

10. Please attach a copy of your current Board Certification and curriculum vitae and return to PMBC.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_